

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144103

FILED
Jan 26, 2005
Secretary of State

Entity Name: GRAHAM CLASSIC KITCHENS, INC

Current Principal Place of Business:

15843 SE 58 PL
OCKLAWAHA, FL 32179

New Principal Place of Business:

Current Mailing Address:

15843 SE 58 PL
OCKLAWAHA, FL 32179

New Mailing Address:

FEI Number: 86-1118060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, RANDALL
15843 SE 58 PL
OCKLAWAHA, FL 32179 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAHAM, RANDALL
Address: 15843 SE 58 PL
City-St-Zip: OCKLAWAHA, FL 32179

Title: ST () Delete
Name: GRAHAM, CHERIE
Address: 15843 SE 58 PL
City-St-Zip: OCKLAWAHA, FL 32179

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: WELTON, JEFF
Address: 5800 HWY 314A
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: WRKR () Change (X) Addition
Name: WELTON, JESSE
Address: 5800 HWY 314A
City-St-Zip: OCKLAWAHA, FL 32179 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERIE GRAHAM

ST

01/26/2005

Electronic Signature of Signing Officer or Director

Date